

Exhibit 11

From: "James Shupe (Formerly Jamie Shupe)"
Sent: 1/26/2020 11:05:28 AM
To: "Michael Laidlaw" <mike@drlaidlaw.com>
Cc: "Gary McCaleb" <mccgsm@gmail.com>, "Andre Van Mol" <95andrev@gmail.com>, "Chris Motz" <cmotz@sdccatholicconference.org>, "David Pickup" <davidpickuplmft@gmail.com>, "Eunie Smith" <alaeagle@charter.net>, "Fred Deutsch" <fred.deutsch@sdlegislature.gov>, "Glenn Ridder" <glenn.ridder@outlook.com>, "Horvath Hacs" <birdcatcher9@yahoo.com>, "Hudson, MD Bernard" <loyolAMD82@gmail.com>, "Jane Robbins" <rlrobb123@gmail.com>, "Jeff Shafer" <jshafer@adflegal.org>, "Jon Hansen" <jon.hansen@sdlegislature.gov>, "Katherine Cave" <kelseycoalition@gmail.com>, "MD Paul Hruz PhD" <hruz_p007@att.net>, "Margaret Clarke" <margaretclarke317@icloud.com>, "Mary McAlister" <mmcalister@childparentrights.org>, "Matt Sharp" <msharp@adflegal.org>, "McHugh Paul" <pmchugh1@jhmi.edu>, "Michelle Cretella" <drmcrtella@gmail.com>, "Monique Robles MD" <pamosa27@comcast.net>, "Natasha Chart" <natasha.chart@gmail.com>, "Patrick Lappert" <patrick@lappertplasticsurgery.com>, "QUENTIN VAN METER" <kidendo@comcast.net>, "Richard Mast" <rmast@lc.org>, "Roger Brooks" <rbrooks@adflegal.org>, "Timothy Millea MD" <tmillea@qcora.com>, "Vernadette Broyles" <vbroyles@childparentrights.org>, "Walt Heyer" <waltsbook@yahoo.com>, "William Malone" <malone.will@gmail.com>
Bcc:
Subject: Re: Opposition strategy outlined in article. Have suggestions? - Physician-Patient relationship

A thought comes to mind from a conversation with Fred yesterday. Is there anything in these bills that stops parents from transporting these children across state lines for hormones, blockers or surgeries?

As I pointed out to Fred yesterday, Jazz Jennings would get flown to California to get treated by Olson-Kennedy. Most of the surgeries are taking place on the west coast and at a chop shop in the northeast.

California: "For the last four years, Drs. Gil and Zol Kryger have averaged 100 "top surgeries" a year, each costing \$6,000 to \$9,000."

<https://www.sandiegouniontribune.com/lifestyle/people/sdut-transgender-teens-new-life-2016apro7-story.html>

"Johnson is one of the top surgeons for transgender chest reconstruction in the country, performing, she believes, the most such surgeries in New England, and possibly in the Northeast."

<https://www.providencejournal.com/topics/special-reports/actually-andy/20131202-actually-andy-part-3-surgery-is-a-major-milestone-in-transgender-journey-gallery.ece>

And as the opposition likes to claim now: "we don't know of any doctors operating on kids in South Dakota."

So while the act may deter them from setting up shop: where are we on the interstate transport question?

Should bill language also address transporting a state's children across state lines?

James

On Sunday, January 26, 2020, 01:43:13 PM EST, Michael Laidlaw <mike@drlaidlaw.com> wrote:

Appreciate that Gary. I will definitely keep that in mind from here on out. I will keep those thoughts to our group.

The key again is for Fred to show that these procedures do not constitute part of the normal doctor-patient relationship (which is what the other side is trying to argue). The minor cannot provide meaningful consent. And therefore the physician who performs these procedures and prescribes these meds for the specific purpose of "gender change" has committed a crime.

I'll leave it to the legal and legislative people to figure out how to best put these concepts into words that will convince the governor that she has strong reasoning to sign the bill.

-Mike

On 2020-01-26 09:46, James Shupe (Formerly Jamie Shupe) wrote:

Here's the email chain with Kara removed as requested and Greg removed because he's on vacation.

Please put further comments in this thread when it hitting reply all. Understandably, it's difficult to edit addressed on mobile devices.

James

On Sunday, January 26, 2020, 12:31:06 PM EST, Gary McCaleb <mccgsm@gmail.com> wrote:

Thanks, mike; you raise an excellent point, and that is worth working in. The point I was indirectly making is that doctors are speaking from their strength when you speak to medicine and patients, but seemed unduly strident and accusatory when you deem other doctors as criminals out the gate. Better to make the medical case, then bring the law in as an aid to protecting the practice of medicine rather than making particular doctors become criminals.

On Sun, Jan 26, 2020 at 07:17 Michael Laidlaw <mike@drlaidlaw.com> wrote:

That's an excellent line Gary. And I suppose my language would be seen as to stark and harsh, particularly coming from a physician. Though I was more so putting out ideas for Fred to consider.

Stepping back a bit though, philosophically, we are trying to make something to be recognized as a crime by the legal system. But is a crime not a crime if it is not yet "on the books"? Seems as though it has to be said somehow that these are crimes waiting to be recognized and codified into law. Perhaps it could be stated in a less inflammatory way then what I've written.

-Mike

On 2020-01-26 06:01, Gary McCaleb wrote:

How about closiNg with the point that as medical professionals you would never support unnecessary government regulation or Your profession. But when dangerous medical practices pose a clear and present danger to patients—especially children—the state must act.

On Sat, Jan 25, 2020 at 22:56 Michael Laidlaw <mike@drlaidlaw.com> wrote:

The following is along the lines of what Kara, Natasha, and Michelle have been saying. In fact Michelle and I and others once had a conversation about Olson-Kennedy's teen mastectomy study. We concluded that it is not a scientific study at all, but a document filled with details of crimes by doctors against girls and young women.

Here is my version rebutting the argument that this bill will cause an interference in the patient-physician relationship:

Doctors who willfully harm patients are criminals. If a doctor drugs a patient unconscious and surgically removes her 14 year old, healthy breasts, this is a criminal act. The 14 year old cannot freely give consent to this procedure as she does not have the capacity to know what her self at age 25 or 30 years old would want. She can never have functional breasts

replaced. Women who thought they were trans have regretted this happened to them. One such woman uses donor milk because she is physically incapable of producing milk after her mastectomy.

Likewise an 11 or 12 year old cannot make an informed consent decision to stop normal puberty. Puberty blockers lead in the majority of cases to sterilization and sexual dysfunction. A boy or a girl of that age cannot possibly know or understand if their future self at age 25 or 30 would want a child and functional sexual relationships. They are not developmentally able to make such a decision.

The physician who blocks normal puberty and places the child on a pathway to sterility - which is what happens in the majority of cases - is a criminal.

The cases described here do not constitute healthy physician-patient relationships. Indeed these are not physician-patient relationships at all, they are criminal-victim relationships. The physician who does mastectomies of 14 year old breasts or provides 11 years old puberty blockers has willfully caused harm to a child - notwithstanding the desires or knowledge of the parents or child! The child is simply not able to consent to the harms that will result. Just as a girl could not possibly provide consent to female genital mutilation in another context. No matter if the parents and doctors all sign forms in agreement.

The physician is ultimately responsible for the harms as he or she is the only one who can sign the prescriptions and use the scalpels and surgical tools in the operating room. The physician is criminal in these scenarios and must be prosecuted by the law.

A just society cannot allow children - who by nature do not have the cognitive and developmental capacity to comprehend the damage to their bodies and reproductive capabilities - to undergo these harmful procedures.

-Mike

On 2020-01-25 10:05, QUENTIN VAN METER wrote:

Short, sweet and top notch.

Quentin

On January 24, 2020 at 8:08 PM Michael Laidlaw <mike@drlaidlaw.com> wrote:

All,

I've recorded my SD testimony and put it up on YouTube. Please share:

<https://youtu.be/jBIDOSTgRTc>

-Mike

On 2020-01-21 11:19, Natasha Chart wrote:

Exactly.

And even in the case of something like cancer, any sterilization is a side effect, rather than a goal, of a treatment for other purposes. There's no directive that children with cancer must be sterilized, and if doctors could prevent that outcome, surely they would. For no other type of child is that considered a humane end goal of treatment.

On Tue, Jan 21, 2020, 1:46 PM Vernadette Broyles <vbroyles@childparentrights.org> wrote:

Barring an actual physical disease state for which such interventions offer a cure. Puberty and a child's biological sex are not a disease. They are part of normal human development and human functioning to be protected in a developing minor.

Vernadette

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On Jan 21, 2020, at 1:38 PM, Natasha Chart <natasha.chart@gmail.com> wrote:

Kara will be joining us to testify, and I bet that she would be willing to join a statement saying that there's no definable class of person who needs to be sterilized as children.

On Tue, Jan 21, 2020, 12:57 PM Vernadette Broyles <vbroyles@childparentrights.org> wrote:
Fred and all,

CPR-C can prepare a rebuttal this week to the ACLU that Mary (UCAL Berkely), Jane Robbins (Harvard Law), and I (Harvard Law, Guardian ad Litem for children) can sign and send. I can ask Kara Dansky (former ACLU lawyer) of Womens Liberation Front if she'd be willing to sign from the left. Mary's email re: involuntary sterilization would be key part of the response. We also need to stress the point the the ACLU is entirely missing the point of this bill — it nothing to do with discriminating against any class of children, but rather everything to do with protecting a vulnerable group of children, and all children (given the social contagion). While there may be a constitutional right to refuse to carry a child to term (under Roe), there is no constitutional right to chemically and surgically mutilating one's healthy body, where there is no disease to be treated — that is child abuse.

When would you need this?

Vernadette

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On Jan 16, 2020, at 11:42 AM, Michael Laidlaw <mike@drlaidlaw.com> wrote:

Very well stated Mary.

On a different note, I have this new thread dispelling the "wrong puberty" argument.

<https://twitter.com/MLaidlawMD/status/1217698028858986497>

-Mike

On 2020-01-16 07:08, Mary McAlister wrote:

Yes, and also point out that these procedures amount to involuntary sterilization of minors. They cannot legally or psychologically consent. Their parents cannot give informed consent since the knowledge necessary for informed consent does not exist. The Supreme Court struck down laws providing for sterilization of serial criminals in *Skinner v. Oklahoma* and mentally incompetent adults cannot be sterilized even if their guardians consent without a court order. Are the ACLU and similar groups advocating for involuntary sterilization of children? Also their equal protection arguments are without merit. "Transchildren" are not being treated differently from other children. In fact the opposite is true. This bill will ensure that "transchildren" have the same protections from dangerous medical experiments as do other children.

On Thu, Jan 16, 2020, 8:55 AM Natasha Chart <natasha.chart@gmail.com> wrote:
Agreed.

On Thu, Jan 16, 2020 at 8:33 AM <drmcretella@gmail.com> wrote:

Let's Memorize Katherine's response and repeat it ad nauseam regardless the question or accusation. That is the bottom line here. We must be bull dogs on this fact and principle.

Sent from my iPhone

On Jan 16, 2020, at 7:59 AM, Kelsey Coalition <kelseycoalition@gmail.com> wrote:

No doctor or parent has a right to subject a child to a life-altering medical experiment with unknown long-term consequences. Without this ban in place, SD will follow what is already happening in other states: minors who successfully sue in court to obtain this supposedly "life-saving" medical intervention. And when they grow up with irreversible regret, who will be liable? The state.

This ban is also important to prevent custody battles. We have several parents who have reached out to the KC because of a former spouse who is intent on

medicalizing their child. Finding an attorney to help is nearly as difficult as finding a therapist. And even when they do, who knows how a judge will rule? Banning these procedures will take these serious medical decisions away from misinformed judges.

The claim that this is lifesaving medically necessary intervention is the big unchallenged domino that is driving both the legal and medical scandal. This is an oft-repeated claim with no support and it must be confronted directly.

On Wed, Jan 15, 2020 at 6:47 PM Natasha Chart <natasha.chart@gmail.com> wrote:

The ACLU have done as much as anyone could to make sure it's impossible to define a class of persons under these laws.

On Wed, Jan 15, 2020, 5:22 PM <drmcretella@gmail.com> wrote:

Mike,

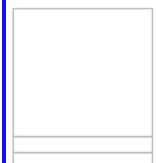
Look at the medical claim in that "legal" ACLU quote; it is false on multiple grounds

"no such thing as a medically diagnosable group of trans anybody; we are talking about minors! blockers, wrong sex hormones and surgical mutilation are never medically necessary in minors!"

Sent from my iPhone

On Jan 15, 2020, at 5:00 PM, David Pickup <davidpickuplmft@gmail.com> wrote:

Translation..."It's ok to harm boys by removing body parts because at least we're preserving a class of people." This is the height of political correctness.



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On Jan 15, 2020, at 3:56 PM, Michael Laidlaw <mike@drlaidlaw.com> wrote:

"The ACLU of SD said in a statement that it's unconstitutional to single out one group of people and categorically ban all care, no matter how medically necessary".

Legal experts have an opinion on that statement?

-Mike

On 2020-01-15 11:59, Fred Deutsch wrote:

Updated and expanded article from our state's largest paper. Many of the lines of thought the oppositions will use is outlined in the article. Let me know any recommendations you may have to counter. - Fred

<https://www.argusleader.com/story/news/politics/2020/01/15/south-dakota-legislature-bill-would-punish-doctors-who-perform-sex-reassignment-surgeries-lgbt/4476342002/>

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